

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mother on a Mission (MOM PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TBA Of NJ LLC

Mailing Address 115 Broadway
Rm 1504

City
New York

State
NY

Zip Code
10006-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 29 / 2021

Transaction ID : VVBPDx308V2

Amount of Each Receipt this Period

500.00

☐ Memo Item

LLC - Members below if itemized. Permissible funds.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burgos, Tonio, , ,

Mailing Address 206 Shearwater Ct W
Apt 53

City
Jersey City

State
NJ

Zip Code
07305-5420

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tonio Burgos & Associates Of New Jerse

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 29 / 2021

Transaction ID : VVBPDx308W0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

500.00